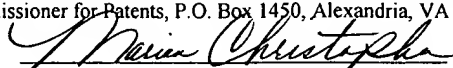


1632

PATENT
Docket No. 532572000104

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Date: April 1, 2004


Marian Christopher

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Casey D. MORROW, *et al.*

Serial No.: 09/756,551

Filing Date: 8 January 2001

For: ENCAPSIDATED RECOMBINANT
POLIOVIRUS NUCLEIC ACID AND
METHODS OF MAKING AND USING SAME

Examiner: Joseph T. Woitach

Group Art Unit: 1632

Confirmation No.: 6750

SUPPLEMENTAL AMENDMENT UNDER 37 C.F.R. § 1.111

MS Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in response to a Notice of Non-Compliant Amendment (37 CFR 1.121) mailed March 23, 2004, for which a response is due April 23, 2004, in connection with the Response filed on December 29, 2003, to Office Action herein, mailed 29 July 2003. Accordingly, this response is timely filed.

Applicants intended in the response filed on December 29, 2003, to cancel claim numbers 1-48 and believed the response reflected that request.

For purposes of clarification, Applicants resubmit the following claim amendments.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/756,551	
	Filing Date	January 8, 2001	
	First Named Inventor	Casey D. MORROW	
	Art Unit	1632	
	Examiner Name	J. T. Voitach	
Total Number of Pages in This Submission	5	Attorney Docket Number	532572000104

ENCLOSURES (Check all that apply)				
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (4 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard		
<table border="1"><tr><td>Remarks</td></tr><tr><td>Customer No. 25225</td></tr></table>			Remarks	Customer No. 25225
Remarks				
Customer No. 25225				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	MORRISON & FOERSTER LLP Kate H. Murashige - 29,959
Signature	
Date	April 1, 2004

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Dated: April 1, 2004	Signature: (Marian L. Christopher)